

County: Jefferson
 COUNTRYSIDE HOME - FDD
 1425 WISCONSIN DRIVE

Facility ID: 2411

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JEFFERSON 53549 Phone: (920) 674-3170
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/02): 32
 Total Licensed Bed Capacity (12/31/02): 32
 Number of Residents on 12/31/02: 27

Ownership:
 Highest Level License: FDDs
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? No
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 29

Services Provided to Non-Residents			Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)			%
			Primary Diagnosis	%	Age Groups	%	Less Than 1 Year			
Home Health Care	No						1 - 4 Years			7.4
Supp. Home Care-Personal Care	No						More Than 4 Years			7.4
Supp. Home Care-Household Services	No		Developmental Disabilities	100.0	Under 65	59.3				85.2
Day Services	No		Mental Illness (Org./Psy)	0.0	65 - 74	37.0				-----
Respite Care	No		Mental Illness (Other)	0.0	75 - 84	3.7				100.0
Adult Day Care	No		Alcohol & Other Drug Abuse	0.0	85 - 94	0.0				*****
Adult Day Health Care	No		Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.0				Full-Time Equivalent
Congregate Meals	No		Cancer	0.0		-----				Nursing Staff per 100 Residents
Home Delivered Meals	No		Fractures	0.0		100.0				(12/31/02)
Other Meals	No		Cardiovascular	0.0	65 & Over	40.7				-----
Transportation	No		Cerebrovascular	0.0		-----				RNs 0.2
Referral Service	No		Diabetes	0.0	Sex	%				LPNs 10.8
Other Services	No		Respiratory	0.0		-----				Nursing Assistants,
Provide Day Programming for			Other Medical Conditions	0.0	Male	55.6				Aides, & Orderlies 65.1
Mentally Ill	No			-----	Female	44.4				
Provide Day Programming for				100.0		-----				
Developmentally Disabled	Yes					100.0				

Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total	%
			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Resi- dents	Of All
Int. Skilled Care	0	0.0	0		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Intermediate	---	---	---		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care	---	---	---		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---		27	100.0	149	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	27	100.0
Traumatic Brain Inj	0	0.0	0		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0				27	100.0		0	0.0		0	0.0		0	0.0		0	0.0		27	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02			

Percent Admissions from:		Activities of	%	% Needing Assistance of One Or Two Staff	Total Number of Residents
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent		
Private Home/With Home Health	0.0	Bathing	0.0	85.2	27
Other Nursing Homes	33.3	Dressing	18.5	55.6	27
Acute Care Hospitals	33.3	Transferring	37.0	37.0	27
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	25.9	59.3	27
Rehabilitation Hospitals	0.0	Eating	51.9	33.3	27
Other Locations	33.3	*****			
Total Number of Admissions	3	Continence		%	Special Treatments
Percent Discharges To:		Indwelling Or External Catheter		3.7	Receiving Respiratory Care
Private Home/No Home Health	14.3	Occ/Freq. Incontinent of Bladder		85.2	Receiving Tracheostomy Care
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel		37.0	Receiving Suctioning
Other Nursing Homes	0.0				Receiving Ostomy Care
Acute Care Hospitals	0.0	Mobility			Receiving Tube Feeding
Psych. Hosp.-MR/DD Facilities	57.1	Physically Restrained		0.0	Receiving Mechanically Altered Diets
Rehabilitation Hospitals	0.0				
Other Locations	14.3	Skin Care			Other Resident Characteristics
Deaths	14.3	With Pressure Sores		0.0	Have Advance Directives
Total Number of Discharges		With Rashes		3.7	Medications
(Including Deaths)	7				Receiving Psychoactive Drugs

Selected Statistics: This FDD Facility Compared to Similar Facilities & Compared to All Facilities

	This Facility %	FDD Facilities %	Ratio	All Facilities %	Ratio

Occupancy Rate: Average Daily Census/Licensed Beds	90.6	83.9	1.08	85.1	1.06
Current Residents from In-County	92.6	38.2	2.43	76.6	1.21
Admissions from In-County, Still Residing	66.7	18.5	3.60	20.3	3.28
Admissions/Average Daily Census	10.3	20.3	0.51	133.4	0.08
Discharges/Average Daily Census	24.1	23.6	1.02	135.3	0.18
Discharges To Private Residence/Average Daily Census	3.4	9.8	0.35	56.6	0.06
Residents Receiving Skilled Care	0.0	0.0	0.00	86.3	0.00
Residents Aged 65 and Older	40.7	15.3	2.66	87.7	0.46
Title 19 (Medicaid) Funded Residents	100.0	99.2	1.01	67.5	1.48
Private Pay Funded Residents	0.0	0.6	0.00	21.0	0.00
Developmentally Disabled Residents	100.0	99.5	1.00	7.1	14.08
Mentally Ill Residents	0.0	0.4	0.00	33.3	0.00
General Medical Service Residents	0.0	0.1	0.00	20.5	0.00
Impaired ADL (Mean)*	47.4	54.0	0.88	49.3	0.96
Psychological Problems	37.0	48.2	0.77	54.0	0.69
Nursing Care Required (Mean)*	12.0	11.3	1.06	7.2	1.67